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# SEARCH CARD

## Chopped Rib Cartilege Molded Into Ears for Earless Persons

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Associated Press Science Reporter

SAN FRANCISCO, Oct. 23.—An ingenious method of growing ears on earless persons, one of the most difficult feats in plastic surgery, was reported today by two specialists in that field, Dr. Lyndon A. Peer of Newark, N. J., and Dr. Gustave Aufricht of New York City.

The structural part of the new ear is made out of rib cartilage, chopped into small pieces like hamburger. It is packed into a plastic mould to give it the contours of a human ear, and the whole thing, somewhat larger than a cigarette lighter, is planted in the abdomen, under the skin.

The plastic mould is full of little holes through which immature tissue building cells from the abdomen can find their way to the cartilage mass. These young cells knit the cartilage pieces into a unit which serves as a foundation for the new ear.

The cartilage unit is removed from the abdomen and from the mould as son as it is well knitted together and planted in place on the side of the head.

In this planting operation the skin over the mastoid bone just back of the ear is lifted and rolled forward to a point just in front of the ear canal. The ear cartilage is placed next to the exposed flesh and the skin flap is pulled back over it and stitched down. This completely covers the new cartilage leaving no opening; only a large bump where the ear is to be.

As the cartilage grows fast to the flesh next to the skull, the outer skin flap attaches itself to the cartilage, following the contours of the new ear and forming what is to be the skin lining of the inside of the new ear.

To bring the ear out a little from the side of the head, the skin just back of the new member is cut and an incision is made between the cartilage and the skull. This enables the surgeon to bend the ear outward. The flesh exposed by this last operation is covered with skin taken from elsewhere on the body.

Dr. Peer and Dr. Aufricht reported their work to the American Society of Plastic and Reconstructive Surgery. The first such operation was performed by Dr. Peer about five years ago. Some of the ears constructed since then were shown by the specialists.

Surgical construction of ears is difficult because there is no place on the body from which a single piece of cartilage large enough to form the hearing member can be taken. The pieces used by Dr. Peer and Dr. Aufricht come from the ends of the ribs near the breast bone.

The specialists said that while the operation produces a permanent ear, it cannot compete in appearance with artificial ears made from plastics.

There are relatively few cases of totally earless persons among war casualties. Most of the cases coming to the surgeons, they said, are children born entirely without ears.

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